



## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Anacleto M. deFigueredo, Diran Apelian, Matt M. Findon, and Nicholas Saddock

Application No.: 10/668,668 Group: 1793

Filed: September 23, 2003 Examiner: Yang, Jie

Confirmation No: 1053

For: ALLOY SUBSTANTIALLY FREE OF DENDRITES AND  
METHOD OF FORMING SAME

### CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or is being facsimile transmitted to the United States Patent and Trademark Office on:

7/17/08 Rhonda Scherer

Date

Signature

RHONDA SCHERER

Typed or printed name of person signing certificate

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment for filing in the above-identified application.

- Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.
- A Small Entity Statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.

**The claims fee has been calculated as shown below:**

			SMALL ENTITY		OTHER THAN SMALL ENTITY	
			RATE	ADDIT. FEE	RATE	ADDIT. FEE
TOTAL	35	MINUS	* 35	0	X \$25	\$
INDEP	3	MINUS	** 5	0	X \$105	\$
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM			+ \$185	\$	+ \$370	\$

\* not fewer than 20

\*\* not fewer than 3

TOTAL = \$        0TOTAL = \$        0**The Application Size Fee has been calculated as shown below:***(Effective for cases filed on or after December 8, 2004)*

Actual Sheets (Including current amendment)	Highest No. of Sheets Paid For (At least 100)	No. of Additional Units Required (Increments of 50 sheets)	SMALL ENTITY		OTHER THAN SMALL ENTITY		Payment Sufficient for up to  [ ] Sheets
			Rate	Total Amount Owed	Rate	Total Amount Owed	
			X \$130	\$[ ]	X \$260	\$[ ]	

**Petition for Extension of Time**

Applicant hereby petitions to extend the time to respond to the Office Action dated January 17, 2008 for 3 months from April 17, 2008 to July 17, 2008. The appropriate fee is set forth below.

**Please charge Deposit Account No. 08-0380 for the following fees:**

<input type="checkbox"/>	Petition for [ ] month Extension of Time	\$
<input type="checkbox"/>	Claims Fee	\$ _____
<input type="checkbox"/>	Application Size Fee	\$ _____
<input type="checkbox"/>	Other Fees:	_____
		\$ _____
		\$ _____
		_____
		TOTAL: \$ _____

**A check is enclosed in payment of the following fees:**

<input checked="" type="checkbox"/>	Petition for 3 month Extension of Time	\$ 1,050
<input type="checkbox"/>	Claims Fee	\$ _____
<input type="checkbox"/>	Application Size Fee	\$ _____
<input type="checkbox"/>	Other Fees:	_____
		\$ _____
		\$ _____
		_____
		TOTAL: \$ 1,050

Please charge any deficiency or credit any overpayment in the fees that may be due in this matter to Deposit Account No. 08-0380. If this submission is in paper form, a copy of this letter is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By Colin C. Durham  
Colin C. Durham  
Registration No.: 52,843  
Telephone (978) 341-0036  
Facsimile (978) 341-0136

Concord, Massachusetts 01742-9133

Dated:

7/17/2008



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CLAIMS REMAINING AFTER AMENDMENT			HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	SMALL ENTITY	OTHER THAN SMALL ENTITY
TOTAL	35	MINUS	* 35	0		
INDEP	3	MINUS	** 5	0		
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM						

\* not fewer than 20

\*\* not fewer than 3

TOTAL = \$       0      TOTAL = \$       0      **The Application Size Fee has been calculated as shown below:***(Effective for cases filed on or after December 8, 2004)*

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			Rate X \$130	Total Amount Owed \$[ ]	Rate X \$260	Total Amount Owed \$[ ]

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<input type="checkbox"/>	Claims Fee	\$	
<input type="checkbox"/>	Application Size Fee	\$	
<input type="checkbox"/>	Other Fees:	\$	
		\$	
		\$	
		TOTAL:	\$

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<input type="checkbox"/>	Claims Fee	\$	
<input type="checkbox"/>	Application Size Fee	\$	
<input type="checkbox"/>	Other Fees:	\$	
		\$	
		\$	
		TOTAL:	\$
			1,050

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